

B

Type

2

Docs

1

Plans

B-126243

Building Permit Number

400

Street Number

Souverain Rd

Street Name

Gey

Community Code

140-030-026

APN

**SONOMA COUNTY  
BUILDING INSPECTION**

575 ADMINISTRATION DRIVE  
SANTA ROSA, CA 95403-2884  
TELEPHONE (707) 527-2221

JOB ADDRESS

400 SOVERAIN RD

UNB

NEAREST CROSS STREET

HWY - 101

MAP REFERENCE

PERMIT NUMBER

INSPECTION AREA

INCORPORATED CITY  YES  NO

**OWNER**  
NAME: Wine World Estates  
MAILING ADDRESS: P.O. Box 111  
CITY: St. Helena, CA 95474  
TEL NO: \_\_\_\_\_  
ZIP CODE: \_\_\_\_\_

**PROJECT**  
ADDRESS: 400 Souverain Road  
CITY: Geyserville, CA 95474  
SUBDIVISION NAME: Souverain Winery  
ASSESSOR'S PARCEL NO: \_\_\_\_\_  
NEAREST CROSS STREET: \_\_\_\_\_

**CONTRACTOR**  
NAME: Roberts Fire Protection Co. Inc.  
ADDRESS: P.O. Box 2076  
CITY: Sebastopol, CA 95473  
TEL NO: 707 829-2500  
STATE LIC NO: 597534  
CLASS: C-16

**DESIGNER**  
NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_  
TEL NO: \_\_\_\_\_  
ZIP CODE: \_\_\_\_\_

CERTAIN AREAS WITHIN SONOMA COUNTY MAY BE GEOLOGICALLY HAZARDOUS. YOU ARE INVITED TO REVIEW ANY GEOLOGIC DATA THAT THIS DEPARTMENT HAS AVAILABLE TO AID YOU IN MAKING A DETERMINATION AS TO THE SUITABILITY OF A PROPOSED BUILDING SITE.

CONDITION OF SOIL AT JOB SITE:  
 ORIGINAL  ENGINEERED FILL  HOUSE FILL

SITE REVIEW: \_\_\_\_\_

BY: \_\_\_\_\_ DATE: \_\_\_\_\_

REQUIRED REPORTS:  
 GEOLOGY  SOILS  COMPACTION  
 FLOOD ZONE  \_\_\_\_\_  
 YES  NO 100 YR FLOOD ELEV: \_\_\_\_\_

SEWER CONNECTION: \_\_\_\_\_ SANITATION ENGINEER: \_\_\_\_\_  
APPROVED BY: \_\_\_\_\_ DATE: 1/1

ROAD ENCROACHMENT:  
APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

SEPTIC TANK INSTALLATION: \_\_\_\_\_ HEALTH DEPARTMENT  
PERMIT NUMBER: \_\_\_\_\_ OR CLEANANCE: \_\_\_\_\_  
DATE RECD: 1/1 DATE ISSUED: 1/1

**LICENSED CONTRACTORS DECLARATION:** I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.  
Contractor's Signature: Larry Roberts Lic # 597534

WORK AUTHORIZED fire sprinklers

**OWNER-BUILDER DECLARATION:** I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec 7031.5 Business and Professions Code): Any city or county which requires a permit to construct, alter, improve, demolish or repair any structure, or to its residence, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).

I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code). The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such improvements are not intended or offered for sale. However, the building, or improvement is not within one year of completion, the owner-builder will have the burden of proving that he did not build or improve for the purpose of sale.

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code). The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law.

I am exempt under Sec. \_\_\_\_\_ B & P.C. for this reason: \_\_\_\_\_

Owner's Signature: \_\_\_\_\_

NEW	ADDN	ALTERATION	REPAIR	MOVING	DEMOLITION
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FLOOR AREA		SIZE IN SQUARE FEET	RATE PER SQUARE FOOT	VALUE	
GARAGE					
DECK					
AWNING					
		2776	1.60	3,802	
FEES - Per Chapter 7, of SB 957, Sonoma County Code		TOTAL		3,802	
				56.55	

**WORKER'S COMPENSATION DECLARATION:** I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof filed with the Building Inspection Department (Sec. 3800 Lab. C).  
Policy No: 641-93-000254 Insurance Co: State Fund  
Applicant's Signature: Larry Roberts Expiration Date: 10-1-94

BUILDING  
 PLAN CHECK 30815  
 PLUMBING  
 ELECTRICAL  
 MECHANICAL  
 GRADING  
 SITE/PROP  
 PLANNING  
 FIRE  
 SEISMIC 84  
 INVEST. FEES  
 PROCESSING FEE 17.00  
TOTAL \$ 74.39

**CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE:** I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California.  
Owner's or Contractor's Signature: \_\_\_\_\_

**CONSTRUCTION LENDING AGENCY:** I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3087 C.C.).  
Lender's Name: None  
Lender's Address: \_\_\_\_\_

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 100 DAYS, AND IS SUBJECT TO EXPIRATION IF WORK THEREUNDER IS SUSPENDED FOR 100 DAYS.

**PERMITTEE**  
NAME: Roberts Fire Protection Co. Inc.  
ADDRESS: P.O. Box 2076 Sebastopol, CA 95473  
CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

I certify that I have read this application and state that the above information is correct, and that I am the owner of the city such an agent of the owner, agree to comply with all County and State laws relating to building construction. I hereby authorize representatives of the County of Sonoma to enter upon the above mentioned property for inspection purposes if after the Certificate of Exemption from the Workers' Compensation provisions of the Labor Code I should become subject to such provisions. I will forthwith comply with the event I do not comply with the Workers' Compensation law, this permit shall be deemed null and void.

SIGNATURE: Larry Roberts DATE: 8-2-94

CONTRACTOR  OWNER  AGENT FOR CONTRACTOR  AGENT FOR OWNER

APPROVED BY: DD DATE: 8-23-94

DATE RECEIVED: 8-2-94 REC'D BY: GS. PREVIOUS PERMIT NO: B-124653 DATE CLEARED FOR ISSUANCE: 8-24-94 Em

TYPE OF CONSTRUCTION: UN OCCUPANCY: B-2

NO OF STORES: 1 NO OF BEDROOMS: \_\_\_\_\_

CERTIFICATE OF OCC: 111644 08/24/94 001

FINAL DATE: 8-24-94 INSPECTOR: E. MAYES

MACHINE SPACE FOR PERMIT FEE:

BLDG.	\$56.55
EQ PGM	\$0.00
BLDG.	\$17.00
***TTL	\$74.39
CHECK	\$74.39
CHNG	\$0.00

**PLANNING DEPARTMENT**

ZONING: \_\_\_\_\_ FILE NO: \_\_\_\_\_ ACRES: \_\_\_\_\_

EXISTING USE: \_\_\_\_\_

PROPOSED USE: \_\_\_\_\_

YARDS FRONT: \_\_\_\_\_ LEFT SIDE: \_\_\_\_\_ RIGHT SIDE: \_\_\_\_\_ REAR: \_\_\_\_\_

**PLANNING APPROVALS**

FOR PERMIT ISSUANCE: \_\_\_\_\_ DATE: \_\_\_\_\_ BY: \_\_\_\_\_

FOR OCCUPANCY: \_\_\_\_\_ DATE: \_\_\_\_\_ BY: \_\_\_\_\_

REMARKS: \_\_\_\_\_

SOUND MITIGATION:  REQUIRED  EXEMPT  
DEVELOPMENT FEES:  REQUIRED  EXEMPT

126243

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